

**PATENT APPLICATION FEE DETERMINATION RECORD**  
Effective January 1, 2003

Application or Docket Number

10/668134  
SUNIP183C1/P2806CNT

**CLAIMS AS FILED - PART I**

	(Column 1)	(Column 2)
TOTAL CLAIMS	5	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	5 minus 20 =	*
INDEPENDENT CLAIMS	2 minus 3 =	*
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

SMALL ENTITY  
TYPE ☐

OR OTHER THAN  
SMALL ENTITY

RATE	FEE		RATE	FEE
BASIC FEE	375.00	OR	BASIC FEE	750.00
X\$ 9=		OR	X\$18=	
X42=		OR	X84=	
+140=		OR	+280=	
TOTAL		OR	TOTAL	750

\* If the difference in column 1 is less than zero, enter "0" in column 2

**CLAIMS AS AMENDED - PART II**

06-07-06

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	* 4	Minus ** 20	= 0
Independent	* 4	Minus *** 3	= 1
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

SMALL ENTITY OR OTHER THAN  
SMALL ENTITY

RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
X\$ 9=		OR	X\$18=	
X42=		OR	X84=	
+140=		OR	+280=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

14, 15, 16, 17

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
X\$ 9=		OR	X\$18=	
X42=		OR	X84=	
+140=		OR	+280=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
X\$ 9=		OR	X\$18=	
X42=		OR	X84=	
+140=		OR	+280=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  
 \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  
 \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

- ☐ 37 CFR 3.73(b) Statement by Assignee  
☐ Information Disclosure Statement with Form PTO-1449 ☐ Copies of IDS Citations  
☒ Preliminary Amendment (*New claims numbered after highest original claim in prior application.*)  
☒ Return Receipt Postcard  
☐ Other:

**Fee Calculation (37 CFR § 1.16)**

☐ Applicant is entitled to Small Entity Status under 37 C.F.R. §1.27.

	(Col. 1) Total Claims		(Col. 2) Claims	(Col. 3) Present Extra	Rate	Additional Fee
TOTAL	05	MINUS	20	= 00	x 18 =	
INDEP.	02	MINUS	3	= 00	x 84 =	
[ ] First presentation of multiple dependent claim					\$280 =	
Basic Filing Fee under 37 C.F.R. §1.16(a)					\$750 =	750.00
TOTAL						750.00
SMALL ENTITY 50% FILING FEE REDUCTION (if applicable)						

- ☒ Check No. 20051 in the amount of \$750.00 is enclosed.  
☒ The Commissioner is authorized to charge any fees beyond the amount enclosed which may be required, or to credit any overpayment, to Deposit Account No. 500388 (Order No. SUN1P183C1).

**General Authorization for Petition for Extension of Time (37 CFR §1.136)**


☒ Applicants hereby make and generally authorize any Petitions for Extensions of Time as may be needed for any subsequent filings. The Commissioner is also authorized to charge any extension fees under 37 CFR §1.17 as may be needed to Deposit Account No. 500388 (Order No. SUN1P183C1).

☒ Please send correspondence to the following address:

**Customer Number 022434**

022434

Date: September 22, 2003

  
 Damon K. I. Kali  
 Registration No. 50,541